	Case 24-16	6283-JKS	S Doc 42		ntered 02/25/25 1 of 9	12:37:38	Desc Main
Fil	in this information to identi	fy your case:					
D	ebtor 1 Jean First No	n-Paul ame	Middle Name	Romes Last Name			
2) C C (ii)	ebtor 2 Spouse, if filing) nited States Bankruptcy Co ase number known) ficial Form 1061 chedule 1: You	ame ourt for the: 24-16283		Romes Last Name District of New Jersey			ed filing ent showing postpetition income as of the following date:
nfo spo	rmation. If you are married use is not filing with you, o	l and not filir do not includ	ng jointly, and you	people are filing together (Debto our spouse is living with you, in about your spouse. If more spac own). Answer every question.	nclude information abou	ut your spouse.	. If you are separated and your
nfo spo add	rmation. If you are married use is not filing with you, o	l and not filir do not includ ame and cas	ng jointly, and you	our spouse is living with you, in	nclude information abou	ut your spouse.	. If you are separated and your
nfo spo add	rmation. If you are married use is not filing with you, o itional pages, write your na	l and not filir do not includ ame and cas	ng jointly, and you	our spouse is living with you, in shout your spouse. If more space	nclude information abou	ut your spouse. eparate sheet to	. If you are separated and your
nfo spo add	rmation. If you are married use is not filing with you, of itional pages, write your name of the pages of the control of the pages. The page of the p	I and not filir do not includ ame and cas /ment e job, Er ith	ng jointly, and you	our spouse is living with you, in about your spouse. If more space own). Answer every question. Debtor 1	nclude information abor	ut your spouse. eparate sheet to Debtor 2	If you are separated and your or this form. On the top of any
nfo spo add	rmation. If you are married use is not filing with you, of itional pages, write your nate of the pages, write your nate of the pages, write your nate of the pages of the page	and not filir do not includ ame and cas ment e job, Er tith hal Oc al, or Er	ng jointly, and you le information a le number (if kn ingloyment state	Debtor 1 Dector Dean-Paul Romes	nclude information abore is needed, attach a se	ut your spouse. eparate sheet to Debtor 2	of this form. On the top of any or non-filling spouse

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse

City

How long employed there? _

Give Details About Monthly Income

unless you are separated.

4. Calculate gross income. Add line 2 + line 3.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need

State

Zip Code

For Debtor 1

\$0.00

City

For Debtor 2 or

\$0.00

State

Zip Code

more space, attach a separate sheet to this form.

non-filing spouse List monthly gross wages, salary, and commissions (before all payroll \$0.00 \$0.00 deductions.) If not paid monthly, calculate what the monthly wage would be. 3. Estimate and list monthly overtime pay. \$0.00 \$0.00 Case 24-16283-JKS Doc 42 Filed 02/25/25 Entered 02/25/25 12:37:38 Desc Main Document Page 2 of 9

Debtor 1 Debtor 2
 Jean-Paul
 Romes

 Lisa
 A.
 Romes

 First Name
 Middle Name
 Last Name

Case number (if known) 24-16283

				For Debtor 1		r Debtor 2 or n-filing spouse	
	Copy line 4 here→	4.		\$0.00		\$0.00	
5.	List all payroll deductions:						
	5a. Tax, Medicare, and Social Security deductions	5a.	_	\$0.00	_	\$0.00	
	5b. Mandatory contributions for retirement plans	5b.	_	\$0.00	_	\$0.00	
	5c. Voluntary contributions for retirement plans	5c.	_	\$0.00	_	\$0.00	
	5d. Required repayments of retirement fund loans	5d.	_	\$0.00	_	\$0.00	
	5e. Insurance	5e.	_	\$0.00	_	\$0.00	
	5f. Domestic support obligations	5f.	_	\$0.00	_	\$0.00	
	5g. Union dues	5g.	_	\$0.00	_	\$0.00	
	5h. Other deductions. Specify:	5h.	+	\$0.00	+	\$0.00	
6.	Add the payroll deductions. Add lines $5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h$.	6.		\$0.00		\$0.00	
7.	Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$0.00		\$0.00	
8.	List all other income regularly received:		_		_	<u> </u>	
	8a. Net income from rental property and from operating a business, profession, or farm						
	Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total			\$04.000.00		40.00	
	monthly net income.	8a.	_	\$21,000.00	_	\$0.00	
	8b. Interest and dividends	8b.	_	\$0.00	_	\$0.00	
	8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive						
	Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	_	\$0.00	_	\$0.00	
	8d. Unemployment compensation	8d.	_	\$0.00	_	\$0.00	
	8e. Social Security	8e.	_	\$0.00	_	\$0.00	
	8f. Other government assistance that you regularly receive						
	Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.						
	Specify:	8f.	_	\$0.00	_	\$0.00	
	8g. Pension or retirement income	8g.	_	\$0.00	_	\$0.00	
	8h. Other monthly income. Specify:	8h.	+_	\$0.00	+_	\$0.00	
9.	Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.		\$21,000.00		\$0.00	
10.	Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.		\$21,000.00	+ _	\$0.00	= \$21,000.00
11.	State all other regular contributions to the expenses that you list in Sched	lule J.					
	Include contributions from an unmarried partner, members of your household	d, your o	depen	dents, your roomm	ates, a	and other	
	friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that a	ire not a	vailab	ole to pay expense	s listed	in <i>Schedule J</i> .	
	Specify:				_	11. 1	\$0.00
12.	Add the amount in the last column of line 10 to the amount in line 11. The amount on the Summary of Your Assets and Liabilities and Certain Statistical				ncome	. Write that 12.	\$21,000.00
							Combined monthly income
13.	Do you expect an increase or decrease within the year after you file this fo	orm?					,
	☑ No.						1
	Yes. Explain:						

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Debtor 1 Jean-Paul **Romes** Debtor 2 Lisa **Romes** A. Case number (if known) 24-16283 First Name Middle Name Last Name

8a. Attached Statement **Business Income**

FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (NOTE: ONLY INCLUDE information directly related to the business operation.)

PART A - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:

1. Gross Monthly Income: \$21,000.00

PART B - ESTIMATED AVERAGE FUTURE MONTHLY EXPENSES:

Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition

Business Debts

TOTAL PAYMENTS TO SECURED CREDITORS \$0.00

Other Expenses

TOTAL OTHER EXPENSES \$0.00

\$0.00 4. TOTAL MONTHLY EXPENSES(Add item 2 - 21)

PART C - ESTIMATED AVERAGE NET MONTHLY INCOME:

5. AVERAGE NET MONTHLY INCOME(Subtract item 22 from item 1) \$21,000.00

Official Form 106I Schedule I: Your Income page 3 Case 24-16283-JKS Doc 42 Filed 02/25/25 Entered 02/25/25 12:37:38 Desc Main Document Page 4 of 9

Fill in this information	on to identify your case:			
Debtor 1	Jean-Paul		Romes	
	First Name	Middle Name	Last Name	Check if this is: ✓ An amended filing
Debtor 2	_Lisa	A.	Romes	
(Spouse, if filing)	First Name	Middle Name	Last Name	A supplement showing postpetition expenses as of the following date:
United States Bank	kruptcy Court for the:		District of New Jersey	
Case number	24-16283	<u> </u>		MM / DD / YYYY
(if known)				

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Househol	d			
1. Is this a joint case? ☐ No. Go to line 2. ☑ Yes. Does Debtor 2 live in a sep ☑ No ☐ Yes. Debtor 2 must file	parate household? • Official Form 106J-2, Expenses for	r Separate Household of Debtor 2.		
2. Do you have dependents? Do not list Debtor 1 and Debtor 2. Do not state the dependents' names.	☐ No ☐ Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2 Child Child	Dependent's age 21 20	Does dependent live with you? No. Yes. No. Yes. No. Yes. No. Yes.
Do your expenses include expenses of people other than yourself and your dependents?	☑ No □ _{Yes}			
Part 2: Estimate Your Ongoing Estimate your expenses as of your ba	nkruptcy filing date unless you are			
date after the bankruptcy is filed. If thi Include expenses paid for with non-ca such assistance and have included it	sh government assistance if you k	now the value of		icable date. our expenses
The rental or home ownership exp for the ground or lot.	enses for your residence. Include t	first mortgage payments and any rent	4	\$1,901.73
If not included in line 4: 4a. Real estate taxes			4a	\$1,258.00
4b. Property, homeowner's, or ren			4b	\$0.00 \$500.00
Home maintenance, repair, an Homeowner's association or co			4c	\$0.00

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Document

Debtor 1 Debtor 2 Jean-Paul Romes Lisa A. Romes First Name Last Name Middle Name

Case number (if known) 24-16283

			Your expenses
5	Additional mortgage payments for your residence, such as home equity loans	5.	\$826.78
S. 1	Utilities:		
(6a. Electricity, heat, natural gas	6a.	\$575.00
(6b. Water, sewer, garbage collection	6b.	\$125.00
(6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$0.00
	6d. Other. Specify:	6d.	\$0.00
	Food and housekeeping supplies	7.	\$1,225.00
. (Childcare and children's education costs	8.	\$0.00
. (Clothing, laundry, and dry cleaning	9.	\$300.00
0.	Personal care products and services	10.	\$150.00
1.	Medical and dental expenses	11.	\$100.00
	Transportation. Include gas, maintenance, bus or train fare.		4000 00
	Do not include car payments.	12.	\$600.00
3.	Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$200.00
4. (Charitable contributions and religious donations	14.	\$50.00
	Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
	15a. Life insurance	15a.	\$586.36
	15b. Health insurance	15b.	\$1,343.00
	15c. Vehicle insurance	15c.	\$544.51
	15d. Other insurance. Specify:	15d.	\$0.00
6.	Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		
	Specify: estimated income tax payments	16.	\$8,160.00
7.	Installment or lease payments:		
	17a. Car payments for Vehicle 1 2019 Maserati Levante	17a.	\$1,696.82
	17b. Car payments for Vehicle 2	17b.	\$0.00
	17c. Other. Specify: Tractor	17c.	\$201.00
	17d. Other. Specify:	17d.	\$0.00
	Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$0.00
	Other payments you make to support others who do not live with you.		
;	Specify:	19.	\$0.00
O. (Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
:	20a. Mortgages on other property	20a.	\$0.00
:	20b. Real estate taxes	20b.	\$0.00
:	20c. Property, homeowner's, or renter's insurance	20c.	\$0.00
:	20d. Maintenance, repair, and upkeep expenses	20d.	\$0.00
:	20e. Homeowner's association or condominium dues	20e.	\$0.00

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Jean-Paul Romes

Debtor 1

Debtor 2	Lisa	A.	Romes	Case number (if know	n) 24-16283
	First Name	Middle Name	Last Name		
21. Other. Sp	pecify: college tui	ition, room and boa	rd, etc.	21. +	\$3,100.00
22. Calculate	e your monthly exp	enses.			
22a. Add	lines 4 through 21.			22a	\$23,443.20
22b. Cop	y line 22 (monthly e	expenses for Debtor 2),	f any, from Official Form 106J-2	22b	\$0.00
22c. Add	line 22a and 22b. T	he result is your month	y expenses.	22c	\$23,443.20
3. Calculate	e your monthly net	income.			
23a. Cop	y line 12 (your comb	bined monthly income)	rom Schedule I.	23a	\$21,000.00
23b. Cop	y your monthly expe	enses from line 22c abo	ve.	23b	\$23,443.20
23c. Sub	tract your monthly e	expenses from your mor	thly income.		
The	result is your monti	hly net income.		23c	(\$2,443.20)
24. Do you e	expect an increase of	or decrease in your exp	enses within the year after you file th	nis form?	
		. , , ,	car loan within the year or do you exp of a modification to the terms of your	•	
√ No.					
Yes.					

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Fill in this information	to identify your case:			
Debtor 1	Jean-Paul		Romes	
	First Name	Middle Name	Last Name	
Debtor 2	Lisa	A.	Romes	
(Spouse, if filing)	First Name	Middle Name	Last Name	_
United States Bankru	uptcy Court for the:		District of New Jersey	
Case number (if known)	24-16283			

 Check if this is a
amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

art 1: Summarize Your Assets	
	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from Schedule A/B	\$836,565.3
1b. Copy line 62, Total personal property, from Schedule A/B	\$609,850.0
1c. Copy line 63, Total of all property on Schedule A/B	\$1,446,415.3
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)	
2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$3,342,197.8
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	¢o o
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.0
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	+\$1,808,250.0
Your total liabilities	\$5,150,447.9
art 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I)	
Copy your combined monthly income from line 12 of Schedule I	\$21,000.0
Schedule J: Your Expenses (Official Form 106J)	
Copy your monthly expenses from line 22c of Schedule J	\$23,443.2

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Debtor 1 Debtor 2	Jean-Paul Lisa	Α.	Romes Romes	Case number (if known) 24-16283
	First Name	Middle Name	Last Name	

Form 122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14	Pa	art 4: Answer These Questions for Administrative and Statistical Records		
✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. ☐ Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income. Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00		No. You have nothing to report on this part of the form. Check this box and submit this form to t	he court with your other sched	ules.
9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00		Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 Your debts are not primarily consumer debts. You have nothing to report on this part of the fo	U.S.C. § 159.	
From Part 4 on Schedule E/F, copy the following: 9a. Domestic support obligations (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00			n Official	\$24,460.73
9a. Domestic support obligations (Copy line 6a.) 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00	9. (Total claim	
9b. Taxes and certain other debts you owe the government. (Copy line 6b.) 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00		From Part 4 on Schedule E/F, copy the following:		
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$0.00		9a. Domestic support obligations (Copy line 6a.)	\$0.00	
		9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$0.00	
9d. Student loans. (Copy line 6f.) \$15,906.00		9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00	
		9d. Student loans. (Copy line 6f.)	\$15,906.00	
9e.Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)			\$0.00	
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)		9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00	
9g. Total . Add lines 9a through 9f		9g. Total . Add lines 9a through 9f.	\$15,906.00	

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n to identify your case:		
Jean-Paul		Romes
First Name	Middle Name	Last Name
Lisa	A.	Romes
First Name	Middle Name	Last Name
ruptcy Court for the:		District of New Jersey
24-16283	<u> </u>	
	Jean-Paul First Name Lisa First Name ruptcy Court for the:	First Name Middle Name Lisa A. First Name Middle Name

 Check if this is ar
amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below	
hid you nay or agree to nay someone who is N	NOT an attorney to help you fill out bankruptcy forms?
Mo	ior an attorney to help you fill out bank upicy forms:
Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).
	digitatare (emolar remi rite).
Inder penalty of perjury I declare that I have re	and the cummary and schedules filed with this declaration and that they are true and correct
inder penalty of perjury, I declare that I have re	ead the summary and schedules filed with this declaration and that they are true and correct.
X /s/ Jean-Paul Romes	X /s/ Lisa A. Romes
Jean-Paul Romes, Debtor 1	Lisa A. Romes, Debtor 2
Date 02/25/2025	Date 02/25/2025
MM/ DD/ YYYY	MM/ DD/ YYYY